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NOTICE OF ALLOWANCE AND FEE(S) DUE

20350

7590

11/06/2009

TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR SAN FRANCISCO, CA 94111-3834 EXAMINER

WHITEMAN, BRIAN A

ART UNIT PAPER NUMBER

1635

DATE MAILED: 11/06/2009

| | APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|---|-----------------|-------------|----------------------|---------------------|------------------|
| Ī | 10/593,842 | 07/10/2007 | Yusuke Nakamura | 082368-000510US | 3233 |

TITLE OF INVENTION: METHOD FOR DIAGNOSING NON-SMALL CELL LUNG CANCER

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO | \$1510 | \$300 | \$0 | \$1810 | 02/08/2010 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW DUE.

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A. If the status is the same, pay the TOTAL FEE(S) DUE shown above

B. If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

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B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

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III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

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Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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| appropriate. All further | correspondence includir ed below or directed oth | g the Patent, advance o | rders and notification of n | naintenance fees wi | ll be mailed to the curren | should be completed where it correspondence address as parate "FEE ADDRESS" for | |
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| CURRENT CORRESPOND | ENCE ADDRESS (Note: Use Bl | ock 1 for any change of address) | Note Fee(pape have | e: A certificate of m s) Transmittal. This ers. Each additional | nailing can only be used f certificate cannot be used paper, such as an assignm of mailing or transmission | for domestic mailings of the for any other accompanying ent or formal drawing, must | |
| TWO EMBARO EIGHTH FLOO | | D AND CREW, L | LP Lher | Certi | ficate of Mailing or Tran | Mailing or Transmission Transmittal is being deposited with the United dient postage for first class mail in an envelope SUE FEE address above, or being facsimile 273-2885, on the date indicated below. | |
| SAN FRANCIS | CO, CA 94111-383 | 1 | | | | (Depositor's name) | |
| | | | | | | (Signature) | |
| | | | | | | (Date) | |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/593,842 TITLE OF INVENTION | 07/10/2007 I: METHOD FOR DIAG | NOSING NON-SMALL | Yusuke Nakamura CELL LUNG CANCER | | 082368-000510US | 3233 | |
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| EXAM | | ART UNIT | CLASS-SUBCLASS | 1 | 4222 | | |
| | N, BRIAN A | 1635 | 514-044000 | | | | |
| "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required. 3. ASSIGNEE NAME A | oondence address (or Cha B/122) attached. dication (or "Fee Address' 22 or more recent) attach ND RESIDENCE DATA less an assignee is identi th in 37 CFR 3.11. Comp | nge of Correspondence 'Indication form ed. Use of a Customer A TO BE PRINTED ON | 2. For printing on the part (1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attornisted, no name will be THE PATENT (print or type data will appear on the part a substitute for filing and (B) RESIDENCE: (CITY) | 3 registered patent vely, e firm (having as a regent) and the names rneys or agents. If neprinted. be) atent. If an assigned assignment. | attorneys 1 member a sof up to o name is 3 e is identified below, the or | document has been filed for | |
| Please check the appropriate. 4a. The following fee(s) Issue Fee Publication Fee (N | riate assignee category or | ermitted) | b. Payment of Fee(s): (Plea A check is enclosed. Payment by credit care | Individual | poration or other private graph of previously paid issue feats attached. | · | |
| | ns SMALL ENTITY statu | us. See 37 CFR 1.27. | b. Applicant is no long | ger claiming SMALI | L ENTITY status. See 37 (| | |
| | | | | Date. | | | |
| Authorized Signature Typed or printed name | | | | | | | |
| This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223 | tiality is governed by 35 d application form to the ions for reducing this but /irginia 22313-1450. DC | FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR | on is required to obtain or r 1.14. This collection is est y depending upon the indiv the Chief Information Office COMPLETED FORMS TO | etain a benefit by the imated to take 12 m idual case. Any con r, U.S. Patent and T D THIS ADDRESS. | e public which is to file (ar inutes to complete, includi nments on the amount of t rademark Office, U.S. Deg SEND TO: Commissioner | nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, | |

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| TWO EMBARCA | | ART UNIT | PAPER NUMBER | |
| EIGHTH FLOOR | O, CA 94111-3834 | | 1635 | |

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 (571)-272-4200.

| | Application No. | Applicant(s) | | | | |
|--|--|--|--|--|--|--|
| | 10/593.842 | NAKAMURA ET AL. | | | | |
| Notice of Allowability | Examiner | Art Unit | | | | |
| | Brian Whiteman | 1635 | | | | |
| The MAILING DATE of this communication apperall claims being allowable, PROSECUTION ON THE MERITS IS herewith (or previously mailed), a Notice of Allowance (PTOL-85) NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT RIOF of the Office or upon petition by the applicant. See 37 CFR 1.313 | (OR REMAINS) CLOSED or other appropriate comn IGHTS. This application is and MPEP 1308. | in this application. If not included nunication will be mailed in due course. THIS | | | | |
| 2. X The allowed claim(s) is/are 35,44,48,54-56,60. | | | | | | |
| Acknowledgment is made of a claim for foreign priority ur a) All b) Some* c) None of the: 1. Certified copies of the priority documents have 2. Certified copies of the priority documents have 3. Copies of the certified copies of the priority documents have International Bureau (PCT Rule 17.2(a)). | been received. been received in Applicat | ion No | | | | |
| * Certified copies not received: | | | | | | |
| Applicant has THREE MONTHS FROM THE "MAILING DATE" noted below. Failure to timely comply will result in ABANDONN THIS THREE-MONTH PERIOD IS NOT EXTENDABLE. 4. A SUBSTITUTE OATH OR DECLARATION must be subminformal patent APPLICATION (PTO-152) which give | IENT of this application. itted. Note the attached EX | (AMINER'S AMENDMENT or NOTICE OF | | | | |
| 5. CORRECTED DRAWINGS (as "replacement sheets") mus | st be submitted. | | | | | |
| (a) including changes required by the Notice of Draftspers | • | ew (PTO-948) attached | | | | |
| 1) hereto or 2) to Paper No./Mail Date | | | | | | |
| (b) ☐ including changes required by the attached Examiner's Amendment / Comment or in the Office action of Paper No./Mail Date Identifying indicia such as the application number (see 37 CFR 1.84(c)) should be written on the drawings in the front (not the back) of | | | | | | |
| each sheet. Replacement sheet(s) should be labeled as such in t | _ | | | | | |
| DEPOSIT OF and/or INFORMATION about the depo attached Examiner's comment regarding REQUIREMENT | | | | | | |
| Attachment(s) 1. ☐ Notice of References Cited (PTO-892) 2. ☐ Notice of Draftperson's Patent Drawing Review (PTO-948) 3. ☐ Information Disclosure Statements (PTO/SB/08), Paper No./Mail Date 4. ☐ Examiner's Comment Regarding Requirement for Deposit of Biological Material | 6. ⊠ Interview Paper No 7. ⊠ Examiner' | nformal Patent Application Summary (PTO-413), b./Mail Date <u>11/3/09</u> . s Amendment/Comment s Statement of Reasons for Allowance | | | | |
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